

EMDR & CHILDREN

A GUIDE FOR PARENTS, PROFESSIONALS & OTHERS WHO CARE ABOUT CHILDREN

WHAT IS EMDR?

Eye Movement Desensitization and Reprocessing is a treatment method that is effective for resolving emotional difficulties caused by disturbing, difficult, or frightening life experiences. EMDR has been used to help children overcome traumatic events and other childhood problems and symptoms.

When children are traumatized, have upsetting experiences or repeated failures; they lose a sense of control over their lives. This can result in symptoms of anxiety, depression, irritability, anger, guilt, and/or behavioral problems. We recognize that events such as accidents, abuse, violence, death, and natural disasters are traumatic but we do not always recognize the ways they effect and influence children's everyday lives. Even common upsetting childhood events such as divorce, school problems, peer difficulties, failures, and family problems can deeply affect a child's sense of security, self-esteem, and development.

When an upsetting, scary or painful experience happens, sometimes the memory of the experience stays "stuck" or "frozen" in the mind. The experience may return in a distressing and intrusive way. Or the child may cope by avoiding everything associated with the upsetting experience. For example, when a child has experienced a bad bicycle accident, there may be repeated nightmares, fears of trying new things, and avoidance of things associated with a bike.

Most experts agree that one way to get "unstuck" and free from the symptoms is through exposure to the traumatic experience. This means to face the memories or troubling events until they are no longer disturbing. EMDR combines elements of several well-established clinical theoretical orientations (e.g., psychodynamic, cognitive, behavioral, client-centered) together with "bilateral stimulation" in a unique and novel way to dissipate the upset associated with the experience. Bilateral stimulation refers to the use of alternating, right-left tracking that may take the form of eye movements, tones or music delivered to each ear, or tactile stimulation, such as alternating hand taps. Creative alternatives have been developed for children that incorporate the bilateral stimulation, using puppets, stories, dance, art, and even swimming.

EMDR helps process the troubling thoughts, feelings, and memories so that children can return to their normal developmental tasks and prior levels of coping. EMDR being used with other childhood problems that are not caused by trauma, such as attention deficits (AD/HD), anxiety and depressive disorders. EMDR can also help to strengthen feelings of confidence, calmness and mastery.

HOW WAS EMDR DEVELOPED? DOES EMDR REALLY WORK?

In 1987, psychologist Francine Shapiro made the chance observation that under certain conditions eye movements can reduce the intensity of negative, disturbing thoughts. Dr. Shapiro studied this effect scientifically, and; in 1989, she published a study reporting success using EMDR to treat adult victims of trauma. Since then, EMDR has developed through the contributions of therapists and researchers all over the world. There are now more scientific studies proving the efficacy of using EMDR to resolve trauma and posttraumatic stress disorder (PTSD) than any other psychotherapy method.

This revolutionary therapy has been adapted and modified for children. Over the last 10 years, EMDR has been used world wide to help children. There are hundreds of case study reports on the positive effects of EMDR with children. Positive outcomes in the Oklahoma bombing, Hurricane Andrew, Hurricane Iniki, the shootings in Jonesboro, Arkansas are just a few case examples of EMDR being successfully used with children. Case reports with children have been consistent with research findings using EMDR with adults. As with many other treatment modalities, scientific controlled outcome studies on child therapy have lagged behind clinical case reports. To date, the research studies conducted on using EMDR with children, have showed positive results, including achieving a positive outcome where previous treatment had failed (Chemtob & Nakashima, 1996).

HOW IS EMDR USED WITH CHILDREN?

EMDR is part of an integrated treatment approach and is often used in conjunction with other therapy practices such as play therapy, talk therapy, behavior therapy and family therapy. EMDR will be explained and used when agreed upon by the family and child. Children and parents are always in control of the process.

A typical EMDR treatment session begins in a positive way by having children use their imagination to strengthen their sense of confidence and well-being. For example, children may be asked to imagine a safe or protected place where they feel relaxed and comfortable or to remember a time when they felt strong and confident. These positive images, thoughts and feelings, are then combined with the "bilateral stimulation." These beginning experiences with EMDR typically give children increased positive feelings and demystify the process of EMDR, so that children know what to expect.

When agreed upon between the parent, child, and therapist, the child is asked to bring up an upsetting memory or event that is related to the focal problem. Bilateral stimulation is used again

while the child focuses on the upsetting experience. When an upsetting memory or event is "desensitized" that means that the child can face the past events or memories and no longer feels disturbed, frightened, or avoidant of the thoughts and feelings attached to the event. The result of "reprocessing" simply means that the child has a more healthy perspective on the upsetting memories or events. The meaning attached to the event is no longer distorted nor interferes with the child's functioning or development. When the event is reprocessed, children can more comfortably believe and trust, "It's over." "I'm safe now." "I did the best I could." "I have other choices now."

WHAT ARE CHILDREN'S REACTIONS TO EMDR?

It is most helpful if parents support the use of EMDR with their children. Parents and professionals can explain that EMDR is a way to get over troubling thoughts, feelings, and behaviors.

The EMDR process is different for each person, because the healing process is guided from within. Some children report that EMDR is relaxing and have an immediate positive response. Other children may feel tired at the end of an EMDR session, and the benefit from the treatment comes in the days to follow. After some children have experienced EMDR, they will specifically request EMDR in other sessions. And then there may be times when the child tries EMDR but will ask to discontinue the procedure, because he or she is not really ready. One ten-year-old had been injured in an accident. She wore a body cast for a year and was preoccupied with injury, illness, and death. After EMDR, she began crying tears of joy and stated, "I'm so happy, it really is over and I am strong." Another five-year-old boy who had behavioral problems and had worked with the therapist using other kinds of therapy, tried EMDR and stated, "Why didn't you do this with me before?" And then another eight-year-old boy who kept having nightmares, stated, "It just

popped out of my head, the monsters are gone." Other children say little at all, but their behavior changes and parents state: "Things are back on track."

HOW DOES EMDR WORK?

While it is not clear how EMDR works, there are ongoing investigations of the possible mechanisms by which EMDR facilitates a reprocessing of human experience. We do know that EMDR is not hypnosis. It may be that EMDR works similarly to what occurs naturally during dreaming or REM (rapid eye movement) sleep, where certain information is processed. It may be that the bilateral stimulation produces a compelled relaxation response or a distraction that helps children and adults relax rather than avoid facing disturbing events and memories. Others think that the bilateral stimulation may help both hemispheres of the brain communicate to one another, and therefore may allow for accessing the body's natural healing mechanisms. In EMDR, all the information, across all modalities (images, sounds, emotions, sensations, and thoughts/beliefs coded in words) is accessed together and metabolized.

HELPFUL RESOURCES

- Chemtob, C., Naskashima, J., & Carlson, J. (2002). Brief treatment for elementary school children with disaster-related posttraumatic stress disorder: A field study. Journal of Clinical Psychology, 58, 99-112.
- Greenwald, R. (1999). Eye movement desensitization and reprocessing (EMDR) in child and adolescent psychotherapy. Northvale, NJ: Jason Aronson Inc.
- Lovett, J. (1999). Small wonders: Healing childhood trauma with EMDR. New York: The Free Press.
- Shapiro, F., (2001). Eye Movement Desensitization and Reprocessing, 2nd Ed. New York: Guilford Press.
- Tinker, R. & Wilson, S. (1999). Through the

eyes of a child: EMDR with children. New York: W.W. Norton & Co.

For more information on EMDR:

*EMDR Institute (Francine Shapiro):
<http://www.emdr.com>

*EMDRIA (EMDR International Association): [http:// www.emdria.org](http://www.emdria.org).

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